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JC962 U.S. PTO

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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1 53(b))	Title of Invention	DESIGN AND USE OF ADVANCED ZINC CHELATING PEPTIDES TO REGULATE MATRIX METALLOPROTEINASES
	Named Inventor(s)	STEPHEN QUIRK DAVID TYRRELL
	Attorney Docket	11301-0200 (44039-227522) KC #15,518
	Express Mail Label No.	EL561433595US

APPLICATION ELEMENTS	ADDRESS TO:	Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231

ACCOMPANYING APPLICATION PARTS

1. ☐ Fee Transmittal Form
   (Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims Small Entity status
3. ☒ Specification, Claims, and Abstract   Total Pages **41**
4. ☐ Drawings   Total Sheets **8**
5. Oath or Declaration   Total Pages
   a. ☐ Newly executed (original or copy)
   b. ☐ Copy from prior application (37 CFR 1.63(d)) *(for continuation/divisional with Box 16 completed)*
      The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.
      (i) ☐ DELETION OF INVENTOR(S)
         Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Microfiche Computer Program *(Appendix)*

7. ☒ Nucleotide and/or Amino Acid Sequence Submission *(if applicable, all necessary)*
   a. ☒ Computer Readable Copy
   b. ☒ Paper Copy *(identical to computer copy)*
   c. ☒ Statement verifying identity of above copies
8. ☐ Assignment:
   a. ☐ Assignment Papers (cover sheet & document(s))
   b. ☐ Assignment is of record in parent application No. _____
9. ☐ 37 CFR 3.73(b) Statement *(when there is an assignee)*
   ☐ Power of Attorney by assignee
10. ☐ English Translation Document *(if applicable)*
11. ☐ Information Disclosure Statement (IDS) PTO-1449
    ☐ Copies of IDS Citations
12. ☐ Preliminary Amendment
13. ☒ Return Receipt Postcard (MPEP 503) *(Should be specifically itemized)*
14. ☐ Certified Copy of Priority Document(s)
15. ☐ Other: _____

16. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information:
    ☐ Continuation   ☐ Divisional   ☐ Continuation-in-part (CIP)   of prior application No: _____
    Recite complete dependency back to first parent application: _____

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